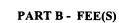
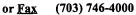
## PART B - FEE(S) TRANSMITTAL





Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450





CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for a	ny change of address)		Note: A certificate of mailing can only be used for domestic mailings of the						
				papers. Each addition	his certificate cannot be used to al paper, such as an assignment	or any other accompanying int or formal drawing, mus				
	90 08/06/2004	$\langle                                      $	E	have its own certificat	te of mailing or transmission.					
COVINGTON &		/0	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		rtificate of Mailing or Trans					
ATTN: PATENT I		1 .	, may 5	States Postal Service	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope					
WASHINGTON, I	ANIA AVENUE, N.W. OC 20004-2401	oct u	H DDG.	transmitted to the US	il Stop ISSUE FEE address PTO (703) 746-4000, on the d	above, or being facsimile late indicated below.				
5/2004 AKELECH2 0000	0077 09942631	12	T.	/		(Depositor's name)				
C: 1504	300.00 DP	ENTE	TO MARIT			(Signature)				
C: 1501	1370.00 OP	914	AU			(Date)				
C:8001	30.00 OP				T					
APPLICATION NO.	FILING DATE		FIRST NAMEI	O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
09/942,631	08/31/2001		Michael I	E. Rickey	00166.112-US00	8160				
APPLN. TYPE	APPLN. TYPE SMALL ENTITY		EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO -\$1		70	\$300	\$1630	11/08/2004				
EXAM	EXAMINER		IT	CLASS-SUBCLASS						
wax, ro	OBERT A	1653		424-499000						
CFR 1.363).  ☐ Change of corresponde Address form PTO/SB/12  ☐ "Fee Address" indicati	e address or indication of "Fe ence address (or Change of C 22) attached. on (or "Fee Address" Indicator more recent) attached. Use	orrespondence	(1) the nator agents (2) the natoregistered	tting on the patent front page, I mes of up to 3 registered pate DR, alternatively, me of a single firm (having as attorney or agent) and the nar id patent attorneys or agents. I	a member a 2Covingnes of up to	a G. Reister				
Number is required.	n more recently attached. Ose	or a Customer		name will be printed.	3 <u></u>					
	RESIDENCE DATA TO B									
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will app I a substitute	ear on the patent. If an assig for filing an assignment.	nee is identified below, the d	ocument has been filed fo				
(A) NAME OF ASSIGN	EE	(B	) RESIDENC	CE: (CITY and STATE OR CO	OUNTRY)					
Alkermes Cont	rolled Therapeu	itics Inc.	II,	Cambridge,	Massachusetts					
Please check the appropriate	assignee category or categor	ies (will not be pr	inted on the p	atent); 🚨 individual 🔄	corporation or other private gr	oup entity 🚨 governmen				
4a. The following fee(s) are	enclosed:	4t	. Payment of	Fee(s):						
X Issue Fee				☑ A check in the amount of the fee(s) is enclosed.						
•	nall entity discount permitted	)	-	ayment by credit card. Form PTO-2038 is attached.						
Advance Order - # of	Copies 10		Deposit Acc	ctor is hereby authorized by count Number <u>50-0740</u>	charge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).				
5. Change in Entity Status	(from status indicated above	)								
a. Applicant claims SN	1ALL ENTITY status. See 3	7 CFR 1.27.	🛭 b. Applica	ant is not claiming SMALL EN	ITITY status. See, e.g., 37 CF	R 1.27(g)(2).				
The Director of the USPTO	is requested to apply the Issu	e Fee and Publica	tion Fee (if ar	ny) or to re-apply any previous	sly paid issue fee to the applica	ation identified above.				
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if required) words of the United States Pate	rill not be accepted nt and Trademark	d from anyone Office.	e other than the applicant; a rep	gistered attorney or agent; or the	he assignee or other party in				
(Authorized Signature)	ndrest 1	e se	00	4. 4,2004						
Andrea G. Reis This collection of informatic an application. Confidential		36, 253 11. The information 122 and 37 CFR		<del>*</del>	the public which is to file (an minutes to complete, includin	d by the USPTO to process				
submitting the completed at	oplication form to the USPT	D. Time will vary	depending u	pon the individual case. Any continuous officer, U.S. Patent and	comments on the amount of ti	me you require to comp				

uns form and or suggestions for reducing this burden, should be sent to the Uniet Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Docket No.: 000166.0112-US00

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Michael E. Rickey et al.

Application No.: 09/942,631

Group Art Unit: 1653

Filed: August 31, 2001

Examiner: R. A. Wax

For: RESIDUAL SOLVENT EXTRACTION

METHOD AND MICROPARTICLES

PRODUCED THEREBY

## TRANSMITTAL LETTER

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Fee Transmittal (1 page);
- 2. Fee(s) Transmittal (Form PTOL-85B);
- 3. Check No. 001570 for \$1,700.00 to cover:

\$1,370.00 issue fee;

\$300.00 publication fee;

\$30.00 advance patent copies fee; and

4. Return receipt postcard;

Application No.: 09/942,631 2 Docket No.: 000166.0112-US00

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Docket No. 000166.0112-US00. A duplicate copy of this paper is enclosed.

It is not believed that extensions of time fees are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: October 4, 2004

Respectfully submitted

Andrea G. Reister/

Registration No.: 36,253 COVINGTON & BURLING 1201 Pennsylvania Avenue, N.W. Washington, DC 20004-2401

(202) 662-6000

Attorney for Applicant

Complete if Known

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OIPE	
OUT O 4 2004 P.	
TRADENIAL ST	

EEE TOANGMITTAL			Complete if Known						
FEE TRANSMITTAL	,	Application Number 09/942,631-Conf. #8160							
for FY 2004		Filing Date				August 31, 2001			
101 F 1 2004	First Named Inventor		Michael E. Rickey						
Effective 10/01/2003. Patent fees are subject to annual revision.		Examiner Name			R. A. Wax				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1653							
TOTAL AMOUNT OF PAYMENT (\$) 1,700.00		Attorney Docket No. 000166.0112-US00							
METHOD OF PAYMENT (check all that apply)	Ī			FEE	CALCU	LATION (co	ontinued)	-	
V Chack Credit Money Other None	3. ADDITIONAL FEES								
X Check Card Order Other None 3. ADDITIONAL FEES									
Deposit Account:	1.200	e Entity.	Small	l Entity					
Deposit Account 50-0740	Fee	Fee	Fee	Fee	-	Fee Desc	ndation		
Number	Code	(\$)	Code	(\$)		ree Desi	cription	Fee Paid	
Deposit Account Account Covington & Burling	1051	130	2051	65	_	- late filing fe			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	e – late provisi	onal filing fee or cover		
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Engli	sh specificatio			
Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a	request for ex p			
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requestin Examiner	g publication of action			
to the above-identified deposit account.	1805	1,840*	1805	1,840*		g publication o	of SIR after		
FEE CALCULATION	1251	110	2251	55		for reply within	n first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension	for reply within	n second month		
Large Entity Small Entity	1253	950	2253	475	Extension	for reply within	n third month		
Fee Fee Fee Fee Fee Paid  Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply within	n fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension	for reply within	n fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of	Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a bri	ief in support o	of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for	or oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to	institute a pub	olic use proceeding		
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55		revive – unav			
(4)	1453	1,330	2453	665	Petition to	revive - uninte	entional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,330	2501	665	Utility issu	e fee (or reiss	ue)	1,370.00	
Claims below Fee Paid	1502	480	2502	240	Design iss	sue fee			
Total Claims 14 -84** = x = 0.00	1503	640	2503	320	Plant issu	e fee			
Independent 1 -10** = x = 0.00	1460	130	1460	130	Petitions t	o the Commis	sioner		
Multiple Dependent =	1807	50	1807	50		g fee under 37	٠.,		
Large Entity Small Entity Fee	1806	180	1806	180			on Disclosure Stmt essignment per	<b></b>	
Code (\$) Code (\$)	8021	40	8021	40	property (t	imes number	of properties)		
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1	` ''	-		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		additional inver			
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for	or Continued E	examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	of a design	or expedited e: n application			
and over original patent				opy of patent w/o color; Publication rly, voluntary, or normal 330.00					
SUBTOTAL (2) (\$) 0.00	*Redi	uced by E	Basic Fi	ling Fee		SUBTO	TAL (3) (\$)	1,700.00	
**or number previously paid, if greater; For Reissues, see above									
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) Andrea G. Reister		ration No ey/Agent)	36	,253		Telephone	(202) 662-6000		
Signature Date October 4, 2004							•		